Approved for use through 11/30/2011. OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT - POWER OF ATTORNEY OR **REVOCATION OF POWER OF ATTORNEY** WITH A NEW POWER OF ATTORNEY **AND** CHANGE OF CORRESPONDENCE ADDRESS

Patent Number	7,785,859
Issue Date	08-31-2010
First Named Inventor	Corinna Lohning , Stockdorf, (DE)
Title	NOVEL METHODS FOR DISPLAYING (POLY)PEPTIDES/PROTEINS ON
Attorney Docket Number	MS015/US/DIV1

I hereby revoke all previous powers of attorney given in the above-identified patent.										
	A Power of Attorney is submitted herewith.									
OR										
X	attorney(s) or	I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) with respect to the patent identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:								
OR	i horoby oppo									
		eby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) with respect to the patent identified re, and to transact all business in the United States Patent and Trademark Office connected therewith:								
		Practitioner(s) Name Registration Number								
							· · · · · · · · · · · · · · · · · · ·			
					,					
Please recognize or change the correspondence address for the above-identified patent to:										
X										
OR										
	The address ass	sociated with Customer Number:								
OI										
	Firm or Individual Name									
Addres										
City				State		Z	ip			
Countr	<u>-</u>									
Teleph		<u> </u>		Email						
I am the: Inventor, having ownership of the patent.										
OI	R	omersing of the patent.								
Patent owner. Statement under 37 CFR 3.73(b) (Form-RTO/SB/96)-\$\text{\text{\$\text{\$\general}\}}\text{\$\text{\$\general}\}}\text{\$\text{\$\general}\}\text{\$\general}\text{\$\general}\}\text{\$\general}\text{\$\general}\text{\$\general}\}\text{\$\general}\$\										
SIGNATURE of Inventor or Patent Owner										
Signa	ture	1.1.16	<i>f</i>		Date	October 6	3, 2010			
Name		Dr. Bernd Hutter			Telephone	+49 89 89	9927 175			
Title and Company Director, Head of IP										
NOTE: Signatures of all the inventors or patent owners of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.										
*Total of forms are submitted.										

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.